PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 Application of Docket Number D 151, 360													
CLAIMS AS FILED - PART I (Column 1) (Column 2)									EN	TITA	·	ОТН	ER THAN
TOTAL CLAIMS]	TYPE	<u>-</u> -		OF		L ENTITY
FOR			NUMBI	NUMBER FILED		NUMBER EXTRA		BASIC		FEE	\exists	RATE	
TOTAL CHARGEABLE CLAIMS			- 	minus 20= *				 	4	150.00	~ OF	BASIC F	EE 300.00
INDEPENDENT CLAIMS			 								OF	X\$50=	=
MULTIPLE DEPENDENT CLAIM PR				minus 3 =					=		OR	X200=	
_			+180=			OR	+360=						
* (* If the difference in column 1 is less than zero, enter *0* in column 2								+		OR		
7-13-0 CLAIMS AS AMENDED - PART II									· L	<u> </u>	ייייע		R THAN
_	(Column 1)			(Column 2) (Column 3)			ـ ۱	SMAL	LEN	TITY	OR		ENTITY
AMENDMENT A	·	REMAINING AFTER AMENDMENT		NUMB PREVIO	ER	PRESENT EXTRA		RATE	TI	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 10	Minus	-20)	= O ·		X\$ 25=	7		OR	X\$50=	1
	Independent	* /	Minus	··· 3		= 0	t	X100=	+	1/	1	X200=	
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								╁	- 	OR	7200-	
								+180=	Ŀ	\triangle	OR	+360=	
		(Column 1)					A	TOTAL DDIT. FEE		· ·	OR	TOTAL ADDIT. FEE	
B	CLAIMS HIGHEST						r		1	001) F		
AMENDMENT		AFTER AMENDMENT		PREVIOU PAID FO	ISLY	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE.		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		-	1	X\$ 25≖			OR	X\$50=	
A	Independent	* ENTATION OF MI	Minus	***		=	T	X100=	T		OR	X200=	
	THOTTALSE	F	400	\vdash									
							L	+180= TOTAL	_		OR	+360=	
	(Caluma 4)										OR A	TOTAL DDIT. FEE	
,		(Column 1) CLAIMS		(Column HIGHES	T.	(Column 3)					_		
		REMAINING AFTER AMENDMENT		NUMBEI PREVIOUS PAID FO	SLY	PRESENT EXTRA		RATE	TIO	DI- NAL		RATE	ADDI- TIONAL
;	Total	•	Minus.	**		2	Tx	\$ 25=				X\$50≈	_EEE
	ndependent	•	Minus	***		2				'	"` -		
	FIRST PRESE	Ľ	100=		°	DR _	X200=						
ı If i	if the entry in column 1 is loss than the contact.									c	R	+360=	1
**	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									\neg	R 4S	TOTAL	
'n	e 'Highest Num	ber Previously Paid	For (Total or	o space is les Independent)	ss than is the t	3, enter "3." nighest number fo	ound i	IT. FEE L in the app	ropria			DIT. FEE L In 1.	

Application or Docket Number